

MEASLES (RUBEOLA)

I. IDENTIFICATION

- A. **CLINICAL DESCRIPTION:** An illness characterized by all of the following: a generalized rash lasting \geq three days; temperature $\geq 38.3^{\circ}\text{C}$ (101°F); cough or coryza or conjunctivitis.
- B. **REPORTING CRITERIA:** Clinical diagnosis.
- C. **LABORATORY CRITERIA FOR CONFIRMATION:**
- Positive serologic test for measles IgM antibody, **OR**
 - Serologic rise in measles antibody level by any standard serologic assay, **OR**
 - Isolation of measles virus from a clinical specimen
- D. **KENTUCKY CASE DEFINITION:** A case that is laboratory confirmed or meets the clinical description and is epidemiologically linked to a confirmed case. A laboratory confirmed case does not need to meet the clinical description.

NOTE: An *imported case* has its source outside the country or state. Rash onset occurs within 18 days of entering the jurisdiction and illness cannot be linked to local transmission. Imported cases are to be classified as international or out-of-state.

An *indigenous case* is defined as a case of measles that is not imported. Cases that are linked to imported cases should be classified as indigenous if the exposure to the imported case occurred in the reporting state. Any case that cannot be proved to be imported should be classified as indigenous.

II. ACTIONS REQUIRED / PREVENTION MEASURES

- A. **KENTUCKY DISEASE SURVEILLANCE REQUIRES URGENT NOTIFICATION:** REPORT TO THE LOCAL OR STATE HEALTH DEPARTMENT **IMMEDIATELY** upon recognition of a case or suspected case in a time period not greater than 24 hours. If health department personnel cannot be contacted directly, notification shall be made by electronic submission or by telephone to the emergency number of the Division of Epidemiology and Health Planning: **1-888-973-7678**.
- B. **EPIDEMIOLOGY REPORTS REQUIRED:**
1. Kentucky Reportable Disease Form – EPID 200 (Rev. Jan/03).
 2. Measles Case Investigation Worksheet (CDC).

C. PREVENTION MEASURES:

- Routinely administer initial dose of MMR (measles, mumps, and rubella) vaccine at 12 - 15 months of age and second dose before school entry (4 - 6 years of age) or, if not received earlier, before sixth grade entry.

D. PUBLIC HEALTH INTERVENTIONS:

- A single case of measles constitutes an outbreak and is a public health emergency. All confirmed and suspected cases of measles must be reported by telephone to the Kentucky Immunization Program (or Communicable Disease Branch Manager or State Epidemiologist) as soon as possible and within no longer than 24 hours.
- Prompt decisions should be made on how best to confirm the diagnosis, determine possible source of exposure and identify contacts that may require vaccine or immune globulin promptly. It must also be decided promptly whether and how to get specimens to the Centers for Disease Control and Prevention (CDC) for virus isolation and further epidemiologic studies.
- Contacts who do not receive vaccine because of medical, religious or other reasons should be excluded from school, child-care or other outbreak settings until at least 2 weeks after the onset of rash in the last case of measles.

III. CONTACTS FOR CONSULTATION

- A. KENTUCKY DEPARTMENT FOR PUBLIC HEALTH, IMMUNIZATION PROGRAM: 502-564-4478.
- B. KENTUCKY DEPARTMENT FOR PUBLIC HEALTH, COMMUNICABLE DISEASE BRANCH: 502-564-3261.
- C. KENTUCKY DEPARTMENT FOR PUBLIC HEALTH, SURVEILLANCE AND HEALTH DATA BRANCH: 502-564-3418.
- D. KENTUCKY DEPARTMENT FOR PUBLIC HEALTH, DIVISION OF LABORATORY SERVICES: 502-564-4446.

IV. RELATED REFERENCES

1. Chin, James, ed. MEASLES. In: Control of Communicable Diseases Manual. 17th ed. Washington, DC: American Public Health Association, 2000: 330 - 335.

2. Pickering, LK, ed. Measles. In: 2000 Red Book: Report of the Committee on Infectious Diseases. 25th ed. Elk Grove Village, IL: American Academy of Pediatrics, 2000: 385-396.